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SECURITY ORDER RECOMMENDATION BY DEFENSE AGENCY

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I hereby acknowledge as indicated by my signature on this form that I have inspected this application in administration of 35 USC 181 on behalf of the Agency/Command specified below. I promise not to divulge any information from this application for any purpose other than administration of 35 USC 181.

Recommendation

(e.g. 'Secrecy Not Recommended (SNR)')

Reviewer(s) Signature/Date/Command

W. P. Allen SNR
5-12-04
MAY 12 2004
U.S. Army

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Instructions to Reviewers:

1. All individuals reviewing this application are required under 35 USC 181 to sign and date this form regardless of whether they are making a secrecy order recommendation.

2. The attached copy of the application, any copies made therefrom and this form must be returned to the PTO once a recommendation not to impose secrecy has been made or a secrecy order has been rescinded.

Notice for Completion of Review:

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